

## NEW SERVICE DEFINITION IMPLEMENTATION QUESTIONNAIRE

In relation to implementing the requirements of the new Medicaid services your agency provides, please answer the following questions:

1. What have you learned so far?

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2. What will you try based on what you have learned so far?

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3. What do you think you can accomplish?

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4. What have been your challenges/obstacles?

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5. Describe any issues faced related to staff turnover (administrative/clinical/direct care).

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6. Describe your success and/or challenges in implementing “person-centered thinking” in your supervision and planning processes.

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7. What will you do next?

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**PLEASE SUBMIT THIS QUESTIONNAIRE BY:**

1. Bringing it to your Implementation Review and depositing it in our Questionnaire Box.
2. E-mail to [Barbara.flood@nmccail.net](mailto:Barbara.flood@nmccail.net).
3. Fax to Barbara Flood at 919-508-0968
4. Mail to Barbara Flood at DMH/DD/SAS Accountability Team, 1842 Rosewood Rd., Goldsboro, NC 27530

***THANK YOU FOR YOUR PARTICIPATION,  
WE REALLY WANT TO KNOW WHAT YOU THINK.***